VENDOR COMPLAINT FORM

"<u>VENDOR COMPLAINT AGAINST PARTICIPANT</u>" forms are used to record complaints by vendors against participants. The information is used to identify participant abuse or educational need of participant on FI/CVB and program responsibilities. The completed forms may be mailed to:

Muscogee (Creek) Nation-WIC Program, ATTN: Vendor Coordinator P.O. Box 580, Okmulgee, Oklahoma 74447

VENDOR COMPLAINT AGAINST PARTICIPANT

PROBLEM: (Include WIC Participant and/or WIC Paraprofessional Name)	
NAME OF EMPLOYEE REPORTING PROBLEM:	
VENDOR NAME & ADDRESS:	
COMPLAINT RECEIVED BY:	
DATE COMPLAINT WAS RECEIVED:	
"VENDOR EMPLOYEE NAME(S) WILL NOT BE DISCLOSED DURING HANDLING OF THIS COMPLAINT."	THE

"This Institution Is An Equal Opportunity Provider"

VENDOR COMPLAINT AGAINST PARTICIPANT - SIDE 2

THIS SECTION TO BE COMPLETED BY MUSCOGEE (CREEK) NATION-WIC EMPLOYEE

CTION TAKEN:	
IGNATURE:	
ITLE:	
ΛΤΕ.	